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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.		
First Inventor	Johan Louis Fehrensen	
Title	Orthotic Sandal	
Express Mail Label No.		

See MPEP		FION ELEMENTS  arring utility patent application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450							
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)  Applicant claims small entity status. See 37 CFR 1.27.  3. Specification [Total Pages 9] (preferred arrangement set forth below)  Descriptive title of the invertion  Cross Reference to Related Applications  Statement Regarding Fed sponsored R & D  Reference to sequence listing, a table, or a computer program listing appendix  Background of the Invention  Brief Summary of the Invention  Brief Description of the Drawings (if filed)  Detailed Description  Claim(s)  Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [Total Sheets 2]  5. Oath or Declaration [Total Sheets 1]  a. Welly executed (original or copy)  b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(s) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76				7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:										
Continuation  Divisional  Continuation-in-part (CIP)  of prior application No.:  Prior application information:  Examiner  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
		19. CORRESPON								
Custon	mer Number:	37288		OR Corre	spondenc	e ado	iress below			
Name	Johan Louis Fehrensen									
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City	La Jolla		State CA	Zip Code 92037						
Country	U.S.A.	1 70	elephone 858-558-3412			Fax 858-623-0140				
Name (Print/Type)   Johan Louis Fehrensen										
Signature	1	- Alm			Date	9/9/	2003			

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875							Application or Docket Number				
CLAIMS AS FILED – PART I (Column 1) (Column 2)						SM	SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR NUMBER FILED		NUMBI	NUMBER EXTRA		E	FÉE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))			٥		5	<u>\$375</u>	OR		\$		
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =		- 1. 34		x \$ 9	_	306	OR	x \$ =			
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 =		<u> </u>		x 5 4	<u> </u>	41	OR	x \$ =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					1.	_		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOT/		723	OR	+ \$ =		
"			·		۷.	1017	~L	,, = 0	UK	TOTAL	t , , , ,
	С	LAIMS AS AM	ENDED	– PART II						OTHE	- TIIAAI
<u> </u>		(Column 1)		(Column 2)	(Column 3)	SM	ALL E	NTITY	OR	SMALL	R THAN ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total (37 CFR 1.16(c))	*	Minus	**	=	× \$	_=		OR	x <b>s</b> =	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$	=	-	OR	x \$ =	
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+ \$			OR	+s =	
						TOTAL ADD'L F	FF.		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				7,002122	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
) ME	Total (37 CFR 1.16(c))	•	Minus	**	=	× \$	=		OR	x <b>s</b> =	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$	_		OR	x s =	
AM	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ \$	_		OR	+s =	
				·		TOTAL ADD'L F			OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					,	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$			OR	x \$=	
AMENDMENT	independent (37 CFR 1.16(b))	*	Minus	***	=	x \$			OR	x \$=	
A	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ 5	-		OR	+ s =	
						TOTAL ADD'L F			,	TOTAL	
	If the entry in o	olumn 1 is less tha	n the entry	in column 2, writ	e "0" in column	3.	L		OR	ADD'L FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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